

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

F-4 11	nis report,	traintation Requirements.
Establishment Name	Telephone Number	Date of Inspection PERMIT #
Establishment Address (number and street, city, state, zip code)	312 951 1199	(mm/ad/yr)
[Obel [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		5/29/20 19-55
Owner Copperfield D. (Ingelow, IN 47127	812 396 2063	1 / - / - 1
Oin Lin	Purpose:	Follow-up Release Date
Owner's Address	Routine	M. TODAY
2.2441.033	2. Follow-up	Summary of Violations:
Person in Charge	3. Complaint	Summary or Violations;
3: 1. 1: 1	4. Pre-Operational	
Responsible Person's E-mail	1	C NC R
6:1 . 1. 0 . 1	5. Temporary	Menu Type (See back of page)
Certified Food Manager	6. HACCP	7 P. 80
Bi Long Liv (4/2/24)	7. Other (list)	12345
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI Section#   C/NC   R	MMARV OF VIOLATIONOR LA	
Section# C/NC R Narrative	THE PROCESS AND THE PROCESS AN	<del></del>
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245 NC R Observed soutine rags outside of so	wither solution fallow	d Come del
to day		C-inche
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Discussed Cuid 19 protocol incl	uding masks	
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	spected by (name and title print	
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